	PATE	NT APPLICA	TION FEI	RD 01943/24									
		CLAIM:	AS FILE	D - PART		(Column 2)		SMAL TYPE	LENT	ENTITY		OTHER THA	
	TOTAL CLAS	MS		·				RAT	E	FEE	7	RAT	
	FOR !	·	NUME	NUMBER FILED		NUMBER EXTRA		BASIC	FEE 3	70.00	OR	BASIÇ F	-
	TOTAL CHAR	GEABLE CLAIN	s	minus 20=		•		'X\$ 9			OR	X\$18	_
u	NDEPENDENT	r Claims		minus 3 =		*		X42:				X84=	_
a	AULTIPLE DEI	PENDENT CLAIR	M PRESENT	RESENT				. 440	_		ЮR		
a	If the differen	nce in column 1	ls less than	zero, enler	"0" in o	column 2	- [+140				,+280=	_
		•	•	MENDED - PART II				TOTA	4L		OR	TOTAL	(Constant
	H	(Column 1		(Column 2) (Column 3)				SMAL	LENT	ITY	OR		ir than Lentit
SMT A		CLAIMS REMAINING AFTER AMENDMEN		HIGHE HUMB PREVIOL PAID F	IER USLY	PRESENT EXTRA		RATE	TIO	XDI- NAL E		RATE	ADD TIONA FEE
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ALE PLOSSEN	Independent		Minus	3	21.124	-2		X42=			OR!	X84=	11089
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		. (OR .	+280=	
•				•		•	ما ا	TOTA OIT. FEI			\ <u></u>	TOTAL	
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F	IRST PRESE	VITATION OF MI	ILTIPLE DEP	ENDENT OF	AIM			165		_ OR	-		
16 A 16 A 16 A	re Highest Num re Highest Num	in 1 is less then th ber Previously Pal ber Previously Pa	d For in THIS Id For IN THIS	SPACE is less	than 20 than 3.	, enter "20." enter "3."	ADDIT			OR	ADD	10TAL TO FEE	
m	Tighest Numb	r Previously Paid	For (Total or i			est number for ANAM AR				iox in ca	า การบางเก	7.	

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